## RÉSUMÉ DIGEST

Existing law provides that the medical pronouncement of death by a coroner may be based on personal observation, information, or statements obtained from coroner investigators or emergency medical technicians at the scene who are reporting from firsthand observation of the physical condition of the deceased. Provides that the name of the personnel that the coroner is relying on shall be noted on the coroner's day record or protocol.

New law adds registered nurses and physician assistants to the list of persons upon whose information the coroner may base the medical pronouncement of death, and changes the term "day record or protocol" to "investigative report".

Existing law provides that each coroner may appoint one or more deputy or assistant coroners who possess the same qualifications as the coroner and who need not be residents of the parish, but requires that if a deputy or assistant coroner is not a resident of the parish, that person shall be a licensed physician.

New law retains existing law relative to deputy coroners, but adds that deputy coroners must possess at least the same qualifications as the coroner and further provides that in addition to one or more deputy coroners, the coroner may also appoint one or more assistant coroners who are not required to have the same qualifications as the coroner.

New law authorizes an assistant coroner to serve on a part-time basis for a term not to exceed that of the coroner, and who may serve as an assistant coroner in more than one parish.

New law requires all deputy and assistant coroners to take an oath of office.
Prior law required a physician or other person who had knowledge of a death under sudden, accidental, violent, or suspicious circumstances or without medical attendance within 36 hours prior to death to immediately notify the coroner of the death.

New law reduces the time period from 36 hours to 24 hours.
Effective August 1, 2015.
(Amends R.S. 9:111(B) and R.S. 13:5705 and 5712(A))

